FOR INSTRUCTIONS, SEE BACK OF FORM  DISCLOSURE SUMMARY PAGE	Reset For		FORM DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Orga	anization)ETHIGS	(R	ev. 07/2004)	REPORT
IMPORTANT: Indicate by # type of committee fou are reporting for:  (1 )Statewide/Legislative/Judge Standing for Retention Candidate ( (4 )County Central Committee (5 )County Candidate (6 )City Cand Political Subdivision Candidate (8 )County PAC (9 )City PAC (10 Subdivision PAC (11 ) Local Ballot Issue	2) State PAC (3) State Party idate (7) School Board or Other	Log Sc Co	gged In <u>////</u> anned mputer//	nly 9086 N
CANDIDATE COMMITTEES ONLY:				
Candidate Name	Political Party (if applicable)	Late pos	e reports are sible civil ar	
Office Sought	District (if Senate or House)	pen	alties.	
SIGNATURE OF PERSON FILING REPORT	7/2-644 TÉLEPHONE	- <u>-</u> 1-2/6	4 <u>2</u>	-//-08
I AM FILING A Jan - 19, 2008 (report date)	_ REPORT FOR (1) ELECTION Indicate by	)N /(2)NON /# 2	I-ELECTION	YEAR.
CHECK IF AMENDMENT TO REPORT DATED	·	Local Com	mittees, enter [	Date of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.		which Elec	ijon is held	es, enter County in
STATEMENT	FOF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fire.)	ash on hand at the end	\$	_59	16.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD			م. م	, di
Schedule A: Cash Contributions total (Attach Schedule	ule A) (*also see in-kind below)		359	0.00
Schedule F: Loans Received total (Attach Schedule	F)	•••••		
Schedule H: Total Sales of Campaign Property (Atta	ch Schedule H)			
(Schedule H applies to Candidates' Comr			1	-,
	SUB-TOT	AL\$	418	16.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)			1-11	1 12
			<u> </u>	D. 65
Schedule F: Loan Repayments total (Attach Schedul	•	••••••		
CASH ON HAND at the end of this reporting period (if final rep	ort balance must	\$	363	39.37
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched	dule E)	\$		
**OUTSTANDING LOANS (From Schedule F - Attach Schedu	le F)	\$		
CANDIDATE COMMITTEES ONLY:				<del></del>
CONSULTANT BREAKDOWN (Schedule G Attached?)			Y	ES LUNO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

# CONTRIBUTIONS - MONEY TAKEN IN

(Rev. 07/03) RECEIPTS (Including candidate's personal funds) CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/3/07	ID# CK# 2428	Renee HACK 3741 NIAGARA TR LOGAN, IA 51546		\$ 50	[v
11/18/07	ID# CK#5/37	Lyle McIntosh 115 Noth Apt. B Missouri Valley, IA 51555		150 00	
11   18   07	ID#	PAT HART 1166 MAdison LN Pisgah, IA 51564		18500	
11/19/07	ID#	Jon & Julie Schaben 1154 Ulon Ave Dunlap, IA 51529		18500	
11/18/07	CK#6467 ID#	NAMEY Bleth 25366 Idelwood Rd Underwood, IA 51576		50	V
	1D# 7 СК# <i>2926</i>	W. Ibur & Ruth Busing 705 St Lawrence Dr. Movalley, IA 51555		50 00	
11/18/07	ID# CK# /3/77	Daniel McGinn Po Box 1921 Council Bluffs, IASISO2	-	90 00	
11/18/07	CK# 3/03	Merle & Marjorie Soss 414 N 3rd St. Missouri Valley, IA 515		220	
. / /	CK# 2719	Ron + Sharon Greenwood 117 N 1st Ave LOGAN IA 51546		5000	
, , ,	CK# 5905	Zola Beth Leonard 2393 Stuart Tr. LOGAN, IA 51546		3000	V
		TOTAL (if last page	SUB-TOTAL of this schedule)	\$1,060°	

committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A

SCHEDULE

MONETARY

Reset Form

# **CONTRIBUTIONS - MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form

SCHEDULE

A MONETARY
(Rev. 07/03) RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must	be same as on Statem	ent of Organization)
11	County	Democrats
1111111111	Duniy	PHOGETS

STATE CANDIDATES NOTE: IF A CONTRIBUTION S RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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					1 1
DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK		(if applicable)	1,77071477	RAISER
,	NUMBER			1	INCOME
	ID#	James + Cindie Schaben		00	
inhaling		3019 1/11/17		\$610	
11/18/07	CK# 1994	3819 Hwy 127		410	الـــا
<u> </u>	\( \times \) / / /	Dun/Ap, IA 5/529			
1 / /	10#	William + Anita Whitmore		35	
11/18/07	CK# 4948	1947 Sawyer TR		1 35	
11/10/01	1 /	woodbine, LA 3/3/9			
	ID#	James & Mary Lou Morrow	ľ	171	
11/10/2	CV# cl. c (	1569 Hartley LN		2500	
11/18/07	CK# 8034	Mondamin IA 5/557		aa	
	ID#	Daniel McGinn			
11/11/-		1		0-00	
11/18/07	CK# /3/74	POBOX 1921 Council Blusts, IA 5150	7	25	
<del>                                     </del>	/. <i>J</i> / /-/			1	
, ,	1	Denise O'Brien	•	00	
11/18/07	CK#20/38	59624 Chicago Rd		(1)	
/ / /	9,0,00	Atlantic, IA 50032		10	
	ID#	Zola Beth Leonard		171	
11/10/17	CK# /0 /	2343 Stuart TR		2500	
11/10/01	CK#5904	LOGAN, IA. 51546		(M-)	
	ID#				
1.01-		Bary Altweig 30+W7+h		100	
11/18/07	CK#6297	100+100 1111 515-141	•	100	
<del>-                                    </del>	1D#	LOGAN, IA. 5/546			
( )	10#	Royce + Dorothy Hildreth		200	
11/11/07	CK# /2/72	2259 147th St,		30	
11/1/01	1072	Disgah, IA 51564 - 4024		20	
<b>'</b>	ID#				
1.10.1	CV# \$ 1 -	Nancy L Powell 2491 335th St. In		, 00	
10/3/107	CK# 3457	Missouri Valley, IA 51555	•	/()	
· / · / · / ·	ID#	Roger + Connie Smith		/	
. / /	1017	1905 335th St.		, 00	
11/8/07	cx# <i>73/3</i>	1700 000 A1.		1/17)	1
1/0/0/	10,0	Missouri Valley, IA 51555		100	
		·	SUB-TOTAL	s 970	
				13 / // /	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

# CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

HAVVISON County Democrats

SCHEDULE A	MONETARY
(Rev. 07/03)	RECEIPTS
	CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
11/13/07	CK#5776	Lyle McIntosh 115 N 6th Apt. B Missouri Valley, IA 5155	5	\$ 100	
11/07/07	CK#6763	Missouri VAlley, IA 5155 Donald & La Vonna Clark 3251 180th St. Woodhine, IA 51579		5000	
11/08/07	CK# 5/0/02	George + Kath leen Winther 2683 Loess Hills Tr. Missouri VAlley, IA 5155		5000	
10/31/07	ID# CK# /7/ /	Michael Vittitoe 140 Ave Missouri Valley IA 5155		50 00	
11/10/07	CK#//003	Charles + Dorothy Hildreth 2747 Paxton LN 206AN, IA 51546		15 io	
11/03/07	ID# CK# <i>33/3</i>	Pamela R Imperato 508 N 4th MoVAlley, IA		50	
11/07/07	ID# CK# 7892	Mr4 Mrs. Joseph Bothwell 1779 160th St. Mondamin. IA 51557		1500	[i]
11/5/07	CK# 2074	Bernard & Joan McLaughlin 706 St. Lawrence No. VAlley, IA 51555		4)	
10/31/07	ID# CK# 86.77	S'E Wolford 5435 Light Breeze LN Malley TA 51555		1500	
11/15/07	ID# CK# /893	Georgia & David Johnson 422 Wharon: Missouri Valley LA 51555		2000	
	<i>W</i> 0 1. 1	سنداله استامان المستوار والتساوي والمستوار والمستوار والمستوار والمستوار والمستوار والمستوار والمستوار	SUB-TOTAL	\$4500	
t Diaglacus laur sa	uiros apadidata committar	es to disclose the relationship of any relative making a contribution to	Ĺ	\$	_

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_\_ of \_\_\_\_\_\_ (for Schedule A)

# CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form SCHEDULE

A MONETARY
(Rev. 07/03) RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Mus	t be same as on Si	tatement of Organization)	
HArrison	County	Democrats	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
11/15/07	CK#6884	Helen McIntosh 802 N 8th MuValley, IA 5/555		\$ 20 00	
11/18/67	ID# CK# 3710	Marjorie Brosnahan 2631 Hading TR Logan, IA 51546		10 00	
11/2/07	ID# CK# /6 45	Henry & Betty Marguardt 1903 Huy 30 Missouri Valley, IA 5155		20 00	
11/9/07	ю# ск# <i>3550</i>	Earl Dick 3267 19745+ 14 5/579		2500	V
11/23/07	<sub>10#</sub> 7 <sub>ск#</sub> 8050	Robert + Marianne Sullivan To Weare St Woodbine, IA 51579		25°00	V
11/8/07	id# ck# <i>0989</i>	E Drew Howard 304 1st St Box 27 FISGED, IA 51564		25	
11/8/07	ID# CK# 2899	Roseann Brummer 2613 260th St 2004N TA 51546	-	2500	V
11/1/07	ID# CK# 1903	Wilbur & Ruth Busing nos St Lawrence Dr Missouri Valley, IA		2500	[V
10/20/07	CK# 6571	Toin + Janice Chuala 505 N 4th St Missouri Valley, IA		1500	
1/01/07	ID# CK# 8734	Joan & Jack Martens 3221 MercuriLN MoValley, [A 51555]		2500	
<del>/ /                                  </del>		TOTAL (if last page of	SUB-TOTAL of this schedule)	\$2/5°00	

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Page \_\_\_\_\_\_ of \_\_\_\_\_

Reset Form

# CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE A	MONETARY
(Rev. 07/03)	RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/1/07	CK#	Lydia Caldera 1562 Hartley LN Mondamin, IA 51557		\$ 1500	
1/1/07	ID# CK#	Mondamin, IA 51557 Luis Hatterman 115 E 6th St Lucann, IA 51546		100° 00	
	ID# CK#	Cash received  from fund raiser		/00 cc 815	
	ID# CK#	0 0			
	CK#				
	ID# CK#				
	ID#				
	CK#				
	CK#				
	ID# CK#	•	SUB-TOTAL	93000	

TOTAL (if last page of this schedule,

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

# EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
_	CK THIS BOX IF

COMMITTEE	NAME (Must be s	same as on Statement of Organization)		
Harri	son Cou	inty Democrats		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
lp/15/07	ID# CK# 279	Harrison Co Fair Bd Clo Peggy Kurth 2487 280th St LOGAN	2 Fair Booth @ 50 a piece	\$ /00.00
8/2/07	ID# CK# <sub>280</sub>	Lehman Printing 204 EEric Missouri Valley, IA	Time for a Change Pamphlet	93.63
9/27/07		Woodbine Applefest Com. HAND Delivered	Rental Space At Apple fest	50.00
10/24/07	ID# CK# 282	City of LOGAN HAND Delivered	Rent for hall for Fund-Raisev	100.00
11/1/07	ID#	Julie Groom Hand Delivered	Memorial to Duane Groom former Democrat Supervisor	50.00
12/17/07	id# ck#28+	Missouri Valley Times 501 E Erie Missouri Valley, IA	Caucus Ads	153.00
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	\$511/ /2

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

	/		/
Page _	/_	_ of	

TOTAL (if last page of this schedule)